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COVID-19 Monoclonal Antibody Treatment
MaineCare Member Frequently Asked Questions

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1. I've tested positive for COVID-19. What can I do to reduce the risk of getting sicker?

There are treatments that may reduce your risk of developing serious COVID-19 symptoms. Depending on your age, health history, and how long you've had COVID-19 symptoms, you may qualify for treatment of the disease. The treatment is called monoclonal antibody treatment, or mAb treatment.

Some early evidence suggests that monoclonal antibody treatment can reduce the amount of the virus in a person's system. This amount is known as the viral load. Having a lower viral load means you may have milder symptoms which decreases the likelihood that you will need to stay in the hospital.[1]

2. Is monoclonal antibody treatment covered? Will I have to pay?

Monoclonal antibody treatment is a covered service at no cost or co-pay for MaineCare members, and for individuals who receive the Department's COVID-19 vaccine, testing, and treatment coverage for those who are otherwise uninsured. See the COVID-19 Testing, Treatment, and Vaccination Coverage for Uninsured Individuals document for more information.

3. What is a monoclonal antibody?

Your body naturally makes antibodies, which are proteins that fight infections, but your body may not have antibodies designed to recognize a new virus like SARS-CoV-2, the virus that causes COVID-19. Treatment with monoclonal antibodies, which are medications that have been authorized by the United States Food and Drug Administration (FDA), may help patients with COVID-19 who are at high risk for serious symptoms or hospitalization.

4. Is monoclonal antibody treatment different from a vaccine?

Monoclonal antibody treatment of COVID-19 is different from a vaccine. A vaccine triggers your body's natural immune response to lessen the chances that you will get very sick from the virus, but it can take weeks to develop enough antibodies to be effective.

Monoclonal antibody treatments give your body more immediate protection by providing the antibodies it needs to avoid serious illness when you have the virus.[2] The treatment is given through an infusion (through a vein) or an injection (into your muscle).

[1] United States Department of Health and Human Services. *Monoclonal Antibodies for High-Risk COVID-19 Positive Patients*. https://combatcovid.hhs.gov/i-have-covid-19-now/monoclonal-antibodies-high-risk-covid-19-positive-patients
[2] United States Department of Health and Human Services. *Monoclonal Antibodies for High-Risk COVID-19 Positive Patients*. https://combatcovid.hhs.gov/i-have-covid-19-now/monoclonal-antibodies-high-risk-covid-19-positive-patients

5. **Why should I get the vaccine if I can just get COVID-19 monoclonal antibody treatment if I get sick?**

   The vaccine reduces your risk of getting COVID-19, and your risk of hospitalization and death if you do get COVID-19. If you do get COVID-19, monoclonal antibody treatment can further reduce your risk of developing serious COVID-19 symptoms. Monoclonal antibody treatment does not protect you against getting COVID-19 again, so it is important to get the COVID-19 vaccination as well to protect yourself and those around you.

6. **Am I eligible for monoclonal antibody treatment?**

   You may be eligible for this treatment if you meet the following criteria[3]:

   - You've tested positive for COVID-19
   - You're experiencing mild or moderate COVID-19 symptoms
   - You are 12 years of age or older and weigh at least 88 pounds
   - You've experienced your first symptoms of COVID-19 in the last 10 days
   - You are at high risk for having more serious symptoms of COVID-19 and might need treatment in a hospital.

7. **What makes someone high risk?**

   People can be at high risk because of many reasons including their age, having an underlying medical condition, and other things. Some of the most common reasons are listed below[4]:

   - Age 65 years or older
   - Obesity or being overweight based on Centers for Disease Control and Prevention clinical growth charts
   - Pregnancy
   - Chronic kidney disease
   - Diabetes
   - Immunosuppressive disease or immunosuppressive treatment
   - Heart or circulatory conditions such as heart failure, coronary artery disease, cardiomyopathies, and possibly high blood pressure (hypertension)
   - Chronic lung diseases
     including Chronic Obstructive Pulmonary Disease (COPD), moderate to severe asthma, interstitial lung disease, cystic fibrosis, and pulmonary hypertension
   - Sickle cell disease
   - Neurodevelopmental disorders, such as cerebral palsy

[3] United States Health and Human Services. *How Do I know if I'm High Risk, and What Do I Do Next?* https://combatcovid.hhs.gov/i-have-covid-19/how-do-i-know-if-im-high-risk
[4] United States Health and Human Services. *How Do I know if I'm High Risk, and What Do I Do Next?* https://combatcovid.hhs.gov/i-have-covid-19/how-do-i-know-if-im-high-risk

8. I'm high risk. How can I get COVID-19 monoclonal antibody treatment?

Here are the steps you can take if you have tested positive for COVID-19 within the last 10 days:

- First, ask your doctor to assess you to determine if you qualify for COVID-19 monoclonal antibody treatment.
- If your doctor says you qualify, get a referral from them for COVID-19 monoclonal antibody treatment.

If you think you are eligible for monoclonal antibody treatment, please call your primary care provider.

If you do not have a primary care provider, please contact MaineCare Member Services at 1-800-977-6740. TTY users, dial 711.

9. Where do I find more information about available COVID-19 monoclonal antibody treatments?

You can call your primary care provider for more information about monoclonal antibody treatments.

You can also look at the United States' Food and Drug Administration (FDA) Fact Sheets about the different monoclonal antibody treatments that are available:

- Tixagevimab and Cilgavimab: https://www.fda.gov/media/154702/download
- Bebtelovimab: https://www.fda.gov/media/156153/download
- Tocilizumab: https://www.fda.gov/media/150320/download

Effective February 25, 2022 FDA's EUA Ended

- Sotrovimab: https://www.fda.gov/media/149533/download

Effective January 24, 2022 FDA's EUA Ended

- REGEN-COV (casirivimab and imdevimab): https://www.fda.gov/media/145612/download
- Bamlanivimab and Etesevimab: https://www.fda.gov/media/145803/download

Effective April 1, 2021 FDA's EUA Ended

- Bamlanivimab; https://www.fda.gov/media/143603/download

For more information about protecting yourself from COVID-19, including information about testing and vaccination, please visit: https://www.maine.gov/covid19/.